MONTANA
Department of Public Health & Human Services

March 3, 2003

Montana Medicaid Notice

Durable Medical Equipment Providers

2003 Deleted HCPCS Codes

The following codes (including those with modifiers) will no longer be payable as of April 1, 2003:

A4360	A4370	A4374	A4386	A4454	A4460	A4464	A4572	A4801	A5123	A6263
A6264	A6265	A6405	A6406	E0608	E0690	E1638	K0021	K0034	K0101	K0183
K0184	K0185	K0186	K0187	K0188	K0189	K0551	K0561	K0562	K0563	K0564
K0565	K0566	K0567	K0568	K0569	K0570	K0571	K0572	K0573	K0574	K0575
K0576	K0577	K0578	K0579	K0580	L0300	L0310	L0315	L0317	L0320	L0321
L0330	L0331	L0340	L0350	L0360	L0370	L0380	L0390	L0391	L0400	L0410
L0420	L0430	L0440	L0900	L0910	L0920	L0930	L0940	L0950	L0986	L3218
L3223	L5660	L5662	L5663	L5664	W2501	W2532	W2536	W2538	W2577	W2578
W2658	W2850	W2851	W2930	W2931	W2932	W2933				

Program fee schedules containing the latest adopted HCPCS Level II additions, changes and deletes released by the Centers for Medicare and Medicaid Services (CMS) can be obtained on the website:

http://www.dphhs.state.mt.us/hpsd

Contact Information

If you have questions related to this bulletin, please call the DME program officer at (406) 444-4068. If you have questions regarding claims, please contact Provider Relations 8:00 a.m. - 5:00 p.m. Monday - Friday (Mountain time):

(800) 624-3958 In state
(406) 442-1837 Out of state